

SAR

002551

NMWMP - Hanford

0035847

FILE NAME: ENGINEERING CHANGE NOTICE
RCRA _____
CERCLA _____

MAY 11 1994

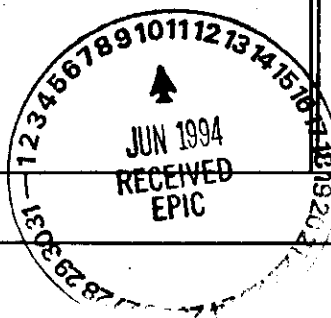
Page 1 of 2

1. ECN 198017

Proj.
ECN

Kennewick

2. ECN Category (mark one)		Supplemental <input checked="" type="checkbox"/>	Change ECN <input type="checkbox"/>	Supersedure <input type="checkbox"/>
Cancel/Void <input type="checkbox"/>		Direct Revision <input type="checkbox"/>	Temporary <input type="checkbox"/>	Discovery <input type="checkbox"/>
3. Originator's Name, Organization, MSIN, and Telephone No. B.E. Innis 200/300 Area Environmental Engineering H6-03, 2-3670				4. Date March 31, 1994
5. Project Title/No./Work Order No. 200-UP-1 Characterization drilling Description of Work		6. Bldg./Sys./Fac. No.		7. Impact Level Q
8. Document Number Affected (include rev. and sheet no.) WHC-SD-EN-AP-151, Rev. 1(2)		9. Related ECN No(s).		10. Related PO No.
11a. Modification Work <input type="checkbox"/> Yes (fill out Blk. 11b) <input checked="" type="checkbox"/> No (NA Blks. 11b, 11c, 11d)	11b. Work Package Doc. No. NA	11c. Complete Installation Work NA _____ Cog. Engineer Signature & Date	11d. Complete Restoration (Temp. ECN only) NA _____ Cog. Engineer Signature & Date	
12. Description of Change Page 16, first full paragraph, first sentence shall be changed to read: RLS gamma spectrometer logging will be conducted on each string of casing prior to downsizing and after reaching total depth on boreholes 299-W19-35 (UPI-6), 299-W19-34A (UPI-7), and on the last string of casing on 299-W19-34B (to the top of the lower mud) and 299-W19-34C (to the top of basalt), and 699-38-68A (from just below the caliche to 30 ft. into groundwater). (UPI-7),				
13a. Justification (mark one)		Criteria Change <input type="checkbox"/>	Environmental <input type="checkbox"/>	Facilitate Const. <input type="checkbox"/>
Design Error/Omission <input type="checkbox"/>		Design Improvement <input type="checkbox"/>	As-Found <input checked="" type="checkbox"/>	Const. Error/Omission <input type="checkbox"/>
13b. Justification Details RLS logging is used mainly to determine the presence of man made radionuclide contamination in soil or groundwater. This well is located approximately 1/2 mile east of 200 west and any source units for radioactive contamination to the vadose zone. Therefor RLS logging will only be performed on the last string of casing which will be advanced into groundwater, where man made radionuclides may be present due to contaminant plume migration.				
14. Distribution (include name, MSIN, and no. of copies) B.E. Innis H6-03 (1) D.J. Moak N3-05 (1) P.M. Pak A5-19 (1) W.R. Thackaberry H4-16 (1) Central files L8-04 (2) EPIC H6-08 (2)			RELEASE STAMP OFFICIAL RELEASE 11 BY WHC DATE MAY 27 1994 Station # 12	



ENGINEERING CHANGE NOTICE

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1. ECN (use no. from pg. 1)

198017

15. Design Verification Required

☐ Yes☒ No

16. Cost Impact

ENGINEERING

Additional

☐ \$

Savings

☐ \$

CONSTRUCTION

Additional

☐ \$

Savings

☐ \$

17. Schedule Impact (days)

Improvement

☐

Delay

☐

18. Change Impact Review: Indicate the related documents (other than the engineering documents identified on Side 1) that will be affected by the change described in Block 12. Enter the affected document number in Block 19.

SDD/DD	<input type="checkbox"/>	Seismic/Stress Analysis	<input type="checkbox"/>	Tank Calibration Manual	<input type="checkbox"/>
Functional Design Criteria	<input type="checkbox"/>	Stress/Design Report	<input type="checkbox"/>	Health Physics Procedure	<input type="checkbox"/>
Operating Specification	<input type="checkbox"/>	Interface Control Drawing	<input type="checkbox"/>	Spares-Multiple Unit Listing	<input type="checkbox"/>
Criticality Specification	<input type="checkbox"/>	Calibration Procedure	<input type="checkbox"/>	Test Procedures/Specification	<input type="checkbox"/>
Conceptual Design Report	<input type="checkbox"/>	Installation Procedure	<input type="checkbox"/>	Component Index	<input type="checkbox"/>
Equipment Spec.	<input type="checkbox"/>	Maintenance Procedure	<input type="checkbox"/>	ASME Coded Item	<input type="checkbox"/>
Const. Spec.	<input type="checkbox"/>	Engineering Procedure	<input type="checkbox"/>	Human Factor Consideration	<input type="checkbox"/>
Procurement Spec.	<input type="checkbox"/>	Operating Instruction	<input type="checkbox"/>	Computer Software	<input type="checkbox"/>
Vendor Information	<input type="checkbox"/>	Operating Procedure	<input type="checkbox"/>	Electric Circuit Schedule	<input type="checkbox"/>
OM Manual	<input type="checkbox"/>	Operational Safety Requirement	<input type="checkbox"/>	ICRS Procedure	<input type="checkbox"/>
FSAR/SAR	<input type="checkbox"/>	IEFD Drawing	<input type="checkbox"/>	Process Control Manual/Plan	<input type="checkbox"/>
Safety Equipment List	<input type="checkbox"/>	Cell Arrangement Drawing	<input type="checkbox"/>	Process Flow Chart	<input type="checkbox"/>
Radiation Work Permit	<input type="checkbox"/>	Essential Material Specification	<input type="checkbox"/>	Purchase Requisition	<input type="checkbox"/>
Environmental Impact Statement	<input type="checkbox"/>	Fac. Proc. Samp. Schedule	<input type="checkbox"/>		<input type="checkbox"/>
Environmental Report	<input type="checkbox"/>	Inspection Plan	<input type="checkbox"/>		<input type="checkbox"/>
Environmental Permit	<input type="checkbox"/>	Inventory Adjustment Request	<input type="checkbox"/>		<input type="checkbox"/>

19. Other Affected Documents: (NOTE: Documents listed below will not be revised by this ECN.) Signatures below indicate that the signing organization has been notified of other affected documents listed below.

Document Number/Revision


Document Number/Revision

Document Number Revision

NA

20. Approvals

Signature	Date	Signature	Date
OPERATIONS AND ENGINEERING		ARCHITECT-ENGINEER	
Cog./Project Engineer B.E. Innis, H6-03	4-29-94	PE	
Cog./Project Engr. Mgr. R.A. Carlson, H6-03	4/29/94	QA	
QA W.R. Thackaberry, H4-16	5-10-94	Safety	
Safety		Design	
Security		Other	
Proj. Prog./Dept. Mgr.			
Def. React. Div.			
Chem. Proc. Div.			
Def. Wst. Mgmt. Div.			
Adv. React. Dev. Div.			
Proj. Dept.			
Environ. Div.			
IRM Dept.			
Facility Rep. (Ops.)			
Other D. Goswami (Wash. State Dept. of Ecology)			

Date Received: <u>5/26/94</u>		INFORMATION RELEASE REQUEST		Reference: WHC-CM-3-4		
Complete for all Types of Release						
Purpose			ID Number (include revision, volume, etc.) <u>1980A7</u> <u>WHC-SD-EN-AP-151, Rev. 1</u> <u>ECM 16988</u>			
<input type="checkbox"/> Speech or Presentation <input type="checkbox"/> Full Paper (Check only one suffix) <input type="checkbox"/> Summary <input type="checkbox"/> Abstract <input type="checkbox"/> Visual Aid <input type="checkbox"/> Speakers Bureau <input type="checkbox"/> Poster Session <input type="checkbox"/> Videotape			<input checked="" type="checkbox"/> Reference <input checked="" type="checkbox"/> Technical Report <input type="checkbox"/> Thesis or Dissertation <input type="checkbox"/> Manual <input type="checkbox"/> Brochure/Flier <input type="checkbox"/> Software/Database <input type="checkbox"/> Controlled Document <input type="checkbox"/> Other			
List attachments. N/A			Date Release Required May 27, 1994			
Title Description of Work for 200-UP-1 Characterization of Monitoring Wells			Unclassified Category UC-630		Impact Level Q	
New or novel (patentable) subject matter? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If "Yes", has disclosure been submitted by WHC or other company? <input type="checkbox"/> No <input type="checkbox"/> Yes Disclosure No(s).			Information received from others in confidence, such as proprietary data, trade secrets, and/or inventions? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Identify)			
Copyrights? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes If "Yes", has written permission been granted? <input type="checkbox"/> No <input type="checkbox"/> Yes (Attach Permission)			Trademarks? <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes (Identify)			
Complete for Speech or Presentation						
Title of Conference or Meeting N/A			Group or Society Sponsoring			
Date(s) of Conference or Meeting		City/State	Will proceedings be published? <input type="checkbox"/> Yes <input type="checkbox"/> No		Will material be handed out? <input type="checkbox"/> Yes <input type="checkbox"/> No	
Title of Journal						
CHECKLIST FOR SIGNATORIES						
Review Required per WHC-CM-3-4		Yes	No	Reviewer - Signature Indicates Approval		
				Name (printed)	Signature Date	
Classification/Uncontrolled		<input type="checkbox"/>	<input checked="" type="checkbox"/>			
Nuclear Information		<input type="checkbox"/>	<input checked="" type="checkbox"/>			
Patent - General Counsel		<input type="checkbox"/>	<input checked="" type="checkbox"/>			
Legal - General Counsel		<input type="checkbox"/>	<input checked="" type="checkbox"/>			
Applied Technology/Export Controlled Information or International Program		<input type="checkbox"/>	<input checked="" type="checkbox"/>			
WHC Program/Project		<input type="checkbox"/>	<input checked="" type="checkbox"/>			
Communications		<input type="checkbox"/>	<input checked="" type="checkbox"/>			
RL Program/Project		<input type="checkbox"/>	<input checked="" type="checkbox"/>			
Publication Services		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	MR Knight	MR Knight	5-25-94
Other Program/Project		<input type="checkbox"/>	<input checked="" type="checkbox"/>			
Information conforms to all applicable requirements. The above information is certified to be correct.						
References Available to Intended Audience <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Transmit to DOE-HQ/Office of Scientific and Technical Information <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Author/Requestor (Printed/Signature) <u>B.E. Innis</u> Date <u>5-20-94</u>			INFORMATION RELEASE ADMINISTRATION APPROVAL STAMP Stamp is required before release. Release is contingent upon resolution of mandatory comments. <div style="text-align: center;">  </div>			
Intended Audience <input type="checkbox"/> Internal <input type="checkbox"/> Sponsor <input checked="" type="checkbox"/> External Responsible Manager (Printed/Signature) <u>R.A. Carlson</u> Date <u>5/20/94</u>						
Date Cancelled			Date Disapproved			

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